

UNITED STATES / Ø/ SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number: 3235-0076					
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SEC USE ONLY					
Prefix	Serial				
DATE	RECEIVED				
1	1				

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.) FrontPoint Financial Services Fund, L.P.							
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	□ Rule 506	☐ Section 4(6)) ULOE		
Type of Filing: New Filing	Amendment						
	A. BAS	IC IDENTIFICATION	N DATA				
1. Enter the information requested about the is:	suer						
Name of Issuer (check if this is an amen FrontPoint Financial Services Fund, L.P.							
Address of Executive Offices	(Number and Stree	Number and Street, City, State, Zip Code)			Telephone Number (Including Area Code)		
2 Greenwich Plaza			1				
Greenwich, CT 06830	(1)	1.00 00 20 0	-1-5	Tile 1			
Address of Principal Business Operations (if different from Executive Offices)	(Number and Stree	t, City, State, Zip Co	ae)	Telephone Number (Including Area Code)			
(ii different from Executive Offices)							
Brief Description of Business PROCESSED AUG 2 2 2005 05064316					4316		
Type of Business Organization ☐ corporation	☐ limited partnersh	nip, already formed	10NSUN VANCIAL	other (please specify	/):		
☐ business trust	limited partners!						
		Month	Year	***************************************			
Actual or Estimated Date of Incorporation or Organical	ganization:			☐ Actual	☐ Estimated		
Jurisdiction of Incorporation or Organization:	(S. Postal Service ab I for other foreign juri		ite:			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (05-05) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director □ General and/or Managing Partner Full Name (Last name first, if individual) FrontPoint Financial Services Fund GP, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) FrontPoint Partners LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Paul Ghaffari Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Arthur Lev Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 □ Director Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) W. Gillespie Caffray Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Dan Waters Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) T.A. McKinney Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Julio Garcia Business or Residence Address (Number and Street, City, State, Zip Code) 2 Greenwich Plaza, Greenwich, CT 06830

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
FrontPoint Offshore Financial	Services Fund, L.P.						
Business or Residence Addre	•	• • • •					
c/o M&C Corporate Services,					nds		
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	·						
FrontPoint Multi-Strategy Fun							
Business or Residence Address 2 Greenwich Plaza, Greenwich	•	City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)		····				
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or		
Full Name (Last name first, if	individual)				Managing Partner		
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Addre	ess (Number and Street,	City, State, Zip Code)					

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$285,793,486	\$285,793,486
	Other (Specify).	\$	\$
	Total	\$285,793,486	\$285,793,486
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	26	\$285,793,486
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		<u>\$</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
			•
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	⊠	\$195,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$195,000

	- Question 1 and total expenses in re-	aggregate offering price given in response to Part C sponse to Part C – Question 4.a. This difference is uer."			\$28	5,598,486
5.	to be used for each of the purposes si furnish an estimate and check the box	sted gross proceeds to the issuer used or proposed nown. If the amount for any purpose is not known, to the left of the estimate. The total of the payments occeds to the issuer set forth in response to Part C				
				Payments to Officers, Directors & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and in	stallation of machinery and equipment		\$		\$
	Construction or leasing of plant bu	ildings and facilities		\$		\$
	offering that may be used in excha	cluding the value of securities involved in this ange for the assets or securities of another issuer		\$		\$
	- ·			\$		\$
	, ,			\$		\$
	· ·	equity and equity-related securities of financial		\$	⊠	\$285,598,486
				\$	П	\$
	Column Totals			\$	\boxtimes	\$285,598,486
		als added)	_			
		D. FEDERAL SIGNATURE	10		SAM.	
con	issuer has duly caused this notice to be stitutes an undertaking by the issuer to fi	signed by the undersigned duly authorized person. It urnish to the U.S. Securities and Exchange Commission dinvestor pursuant to paragraph (b)(2) of Rule 502.	f this r	notice is filed under Rule	505, t	he following signature he information
Issu	uer (Print or Type)	Signature		Date		
Fro	ntPoint Financial Services Fund, L.P.	pe		August 17, 2005		
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Arth	nur Lev	Senior Vice President of FrontPoint Services	s Fund	l GP. LLC, general partr	er of ti	he Issuer

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)